

# 2008/2009 Guelph Storm Donation Request Form

*Completion of this form is a request only and does not guarantee a donation.  
Please type or print clearly*

Type:  Charity  School  Business  Minor Hockey  Other

Request For: \_\_\_\_\_

## Organization Information

Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Contact Phone (Day): \_\_\_\_\_ Email : \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Event Information

Event Name: \_\_\_\_\_

Event Sponsor (if applicable): \_\_\_\_\_

Event Date: \_\_\_\_\_ Event Location: \_\_\_\_\_

Event Description: \_\_\_\_\_

Anticipated Audience Size: \_\_\_\_\_ Anticipated Age Range: \_\_\_\_\_

### ***Please return completed form to:***

Guelph Storm Hockey Club  
Attention: Sarah Twigger  
55 Wyndham Street North  
Guelph, ON N1H 7T8  
Fax: (519) 837-9692

### FOR OFFICE USE ONLY

Item(s) for Donation: \_\_\_\_\_

Approved By: \_\_\_\_\_

Pick Up Specifics: \_\_\_\_\_